

PUBLIC HEALTH DEPARTMENT[641]

Adopted and Filed

Rule making related to concussions and other brain injuries

The Public Health Department hereby adopts new Chapter 54, “Concussion or Other Brain Injury Return-to-Play Protocol,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code section 280.13C.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code section 280.13C.

Purpose and Summary

These rules describe the return-to-play protocol for returning a student to participation in any extracurricular interscholastic activity after the student shows signs, symptoms, or behaviors consistent with a concussion or other brain injury. The return-to-play protocol is based on peer-reviewed scientific evidence consistent with the guidelines of the Centers for Disease Control and Prevention of the United States Department of Health and Human Services. The Department worked in cooperation with the Iowa High School Athletic Association and the Iowa Girls High School Athletic Union in the drafting of the rules.

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on September 26, 2018, as **ARC 4034C**. A public hearing was held on October 16, 2018, at 10:30 a.m. in Room 518, Lucas State Office Building, Des Moines, Iowa. Representatives from the Iowa High School Athletic Association, the Iowa Girls High School Athletic Union and the Iowa Athletic Trainers’ Society were in attendance. Discussion on how to clarify some of the proposed language in the Notice was undertaken. This discussion encompassed several comments received that sought clarity in the proposed rules. Consensus was reached to add a description of concussions in the purpose statement in rule 641—54.1(280), to add a definition of “rest” in rule 641—54.2(280) for clarity, and to add the word “other” into the phrase “concussion or brain injury” throughout the chapter so that the phrase reads “concussion or other brain injury.” The addition of the word “other” makes it clear that a concussion is one type of brain injury.

In paragraph 54.3(1)“a,” the words “the student’s licensed health care provider or parent/guardian, or both, shall be contacted” were changed to “the student’s licensed health care provider and parent or guardian shall be contacted” at the direction of the State Board of Health. Also, references to 2018 Iowa Acts, House File 2442, have been replaced with references to Iowa Code section 280.13C since the amendments in the House File have been codified in that section of the 2019 Iowa Code.

Adoption of Rule Making

This rule making was adopted by the State Board of Health on November 14, 2018.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to the Department's variance and waiver provisions contained in 641—Chapter 178.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on January 23, 2019.

The following rule-making action is adopted:

Adopt the following **new** 641—Chapter 54:

CHAPTER 54

CONCUSSION OR OTHER BRAIN INJURY RETURN-TO-PLAY PROTOCOL

641—54.1(280) Purpose. This chapter describes the return-to-play protocol for concussion or other brain injury to be adopted by July 1, 2019, by the board of directors of each school district and the authorities in charge of each accredited nonpublic school with enrolled students who participate in an extracurricular interscholastic activity in grades seven through twelve. Concussions are a type of brain injury that can range from mild to severe and can disrupt the way the brain normally works. Concussions can occur in an organized or unorganized sport or recreational activity and can result from a fall or from players colliding with each other, with the ground, or with obstacles. Concussions can occur with or without loss of consciousness, but the vast majority of concussions occur without loss of consciousness.

641—54.2(280) Definitions. For the purpose of these rules, the following definitions shall apply.

“Asymptomatic” means the student is no longer showing signs, symptoms, or behaviors consistent with a concussion or other brain injury.

“Contest” means an interscholastic athletic game or competition.

“Extracurricular interscholastic activity” means any dance or cheerleading activity or extracurricular interscholastic activity, contest, or practice governed by the Iowa High School Athletic Association or the Iowa Girls High School Athletic Union that is a contact or limited contact activity as identified by the American Academy of Pediatrics.

“Licensed health care provider” means a physician, physician assistant, chiropractor, advanced registered nurse practitioner, nurse, physical therapist, or athletic trainer licensed by a board designated under Iowa Code section 147.13.

“Medical clearance” means written clearance from a licensed health care provider releasing the student following a concussion or other brain injury to return to or commence participation in any extracurricular interscholastic activity.

“Rest” means a recovery state at which physical and cognitive activities are reduced or removed with the intent to eliminate the signs, symptoms, or behaviors of brain injury.

“Return-to-learn plan” means the plan developed by personnel of a school district or accredited nonpublic school based on guidance developed as required under Iowa Code section 280.13C(6) “b” to provide adjustments or accommodations as the student returns to the classroom.

“Return-to-play” means the gradual, step-wise approach to returning a student to participation in any extracurricular interscholastic activity following a concussion or other brain injury.

641—54.3(280) Return-to-play protocol. The following return-to-play step-wise process shall begin when the student who has been removed from participation in any extracurricular interscholastic activity governed by the Iowa High School Athletic Association or the Iowa Girls High School Athletic Union is no longer showing signs, symptoms, or behaviors consistent with a concussion or other brain injury for a minimum of 24 hours and has received written medical clearance from a licensed health care provider to return to or commence such participation.

54.3(1) Return-to-play process. Each step shall take a minimum of 24 hours.

a. If the student shows signs, symptoms, or behaviors consistent with a concussion or other brain injury at any step of the return-to-play protocol, the student must stop the activity and the student’s licensed health care provider and parent or guardian shall be contacted.

b. If the student shows signs, symptoms, or behaviors consistent with a concussion or other brain injury during this process, an additional 24-hour period of rest shall take place. After the 24-hour period of rest, the student shall drop back to the previous level when the student showed no signs, symptoms, or behaviors consistent with a concussion or other brain injury and begin the progression again.

54.3(2) Return-to-play steps.

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| Step 1 | Athlete has received written medical clearance from a licensed health care provider to begin the return-to-play process, AND the athlete is back to regular activities, including school, without experiencing any concussion signs, symptoms, or behaviors for a minimum of 24 hours. |
| Step 2 | Low impact, light aerobic exercise. Walking or stationary cycling at slow to medium pace. No resistance/weight training. |
| Step 3 | Basic exercise, such as running in the gym or on the field. No helmet or other equipment. |
| Step 4 | Noncontact, sport-specific training drills (dribbling, ball handling, batting, fielding, running drills) in full equipment. Resistance/weight training may begin. |
| Step 5 | Full contact practice and participation in normal training activities. |
| Step 6 | Contest participation. |

These rules are intended to implement Iowa Code section 280.13C.

[Filed 11/15/18, effective 1/23/19]

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EDITOR’S NOTE: For replacement pages for IAC, see IAC Supplement 12/19/18.